FORM D

Name of Offering



UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

FORM D



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276

996

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D. SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMPTION

SEC USE ONLY								
Prefix	1	Serial						
DATE RECEIVED								

Name of Offering (C) check		d name has ch	anged, and inc	dicate change.)	730227
Filing Under (Check box(es) t		Ø Rule 505	☐ Rule 506	☐ Section 4(6)	□ ULOE
Type of Filing: New Filing	ng 💢 Amendment				
	A. BASIC	IDENTIFICA	TION DATA		
1. Enter the information reque	sted about the issuer				
Name of Issuer (check if QUANTUM C			ed, and indica	ite change.)	
Address of Executive Offices 350 W. 9TH AVENUE					er (Including Area Code) 1-1710
Address of Principal Business (if different from Executive O		reet, City, Stat	e, Zip Code)		CCCED
Brief Description of Business				PROC	ESSEL
MARKETING E-COM	MERCE PORTALS)	6 2003
Type of Business Organization ☐ corporation ☐ business trust	limited partnership,	_	d I		ANCIAL DE
Actual or Estimated Date of I Jurisdiction of Incorporation of	ncorporation or Organization or Organization or Organization: (Enter two-	Month I 0	tal Service abb	previation for Stat	stimated &:

GENERAL INSTRUCTIONS

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

not result in a loss of the federal exemption. Conversely, Failure to file notice in the appropriate sta

A. BASIC IDENTIFICATION DAT	Α	
2. Enter the information requested for the following:	E	
• Each promoter of the issuer, if the issuer has been organized within the past f	•	
 Each beneficial owner having the power to vote or dispose, or direct the vote of securities of the issuer; 	·	•
 Each executive officer and director of corporate issuers and of corporate general 	l and managing partne	rs of partnership issuers; and
Each general and managing partner of partnership issuers.		
Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☐ Executive Of	officer Director	☐ General and/or Managing Partner
Full Name (Last name first, if individual) MICHAEL KELLEHER		
Business or Residence Address (Number and Street, City, State, Zip Code) 32469 ANGELO DRIVE, TEMECULA, CA 92592		
Check Box(es) that Apply: Promoter	fficer Director	☐ General and/or Managing Partner
Full Name (Last name first, if individual) LINDA M. BRYSON		
Business or Residence Address (Number and Street, City, State, Zip Code)		
9980 SCRIPPS VISTA WAY #96, SAN DIEGO, CA 9213	1	<i>2</i> ×
Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☐ Executive Of	fficer 🖄 Director	☐ General and/or Managing Partner
Full Name (Last name first, if individual) CHERYL B. RICHARDS		
Business or Residence Address (Number and Street, City, State, Zip Code) 2412 OCEAN TERRACE DRIVE, LAS VEGAS, NV 89128		
Check Box(es) that Apply: C Promoter D Beneficial Owner D Executive Of	fficer Director	. General and/or Managing Partner
Full Name (Last name first, if individual)		
Business or Residence Address (Number and Street, City, State, Zip Codé)		
Check Box(es) that Apply: Promoter Beneficial Owner Executive Of	fficer Director	General and/or Managing Partner
Full Name (Last name first, if individual)		
Business or Residence Address (Number and Street, City, State, Zip Code)		
Check Box(es) that Apply: Promoter Beneficial Owner Executive Of	fficer Director	General and/or Managing Partner
Full Name (Last name first, if individual)	<u> </u>	
Business or Residence Address (Number and Street, City, State, Zip Code)		
Check Box(es) that Apply: Promoter Beneficial Owner Executive Of	fficer Director	☐ General and/or Managing Partner
Full Name (Last name first, if individual)		

Business or Residence Address (Number and Street, City, State, Zip Code)

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1. Has	the issuer	sold, or d	oes the iss	uer intend	to sell, to	non-accre	dited inve	itors in th	s offering	?	• • • • • • • •	Yes	No 🗆
			Ап	swer also	in Append	lix, Colum	n 2, if fili	ng under l	JLOE.				
2 Wha	it is the mi	nimum in						•				. s 12	250
3 , ******					uotopiou				• • • • • • • • •		• • • • • • • • •	Yes	No
3. Does	s the offeri	ing permit	joint own	ership of a	a single un	uit?					• • • • • • • •	. 🗴	ü
4. Ente	r the infor	mation req	uested for	each perso	n who has	been or wi	ll be paid o	or given, di	rectly or in	directly, a	ny commi	S -	
sion	or similar r	emunerati	on for soli	citation of	purchaser	in connec	tion with s	ales of sect	urities in th	e offering.	If a perso	n	
	e listed is a the name of												
	ealer, you								COLOR POS				
Full Name	e (Last nar	ne first, if	individua	1)			· · · · · · · · · · · · · · · · · · ·						
Business of	or Residence	e Address	(Number	and Street	. City. St	ate. Zip C	ode)			<u></u>			
					.,,,	,,	,						
Name of	Associated	Broker or	Dealer .										
Ivalue of	ASOCIALLA	DIORC: O	Dealer										
Connection to	Which Pers	! :	Use Calie	inaid on Tor	d- 4- S	oliais Dussel			 	· ·			
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,	"Ali State	s" or cned	ck individu	iai States)	• • • • • • • •	• • • • • • • •				2.7		□ All :	_
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	(ID)	-
[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO	-
[MT]	[NE]		(NH)	[NJ]	[NM] [UT]	[NY] [VT]	[NC] [VA]	[ND] [WA]	[OH] [WV]	[OK] [WI]	[OR] [WY]	[PA	
[RI]	[SC]	[SD]	[TN]	[TX]	(01)	[4 1]	[1/1]	[mv]	[[[]	[41.]	[44.1]		
ruu Nam	e (Last nar	ne iirst, ii	individua	1)		•							
Dusiness (ar Basidan	. Add	(Number	and Stane	Cin. St	vo Zin C	·						
Dusiness (or Residenc	e Audress	(Number	and Street	i, City, St	ste, Zip Ci	ode)						
Name of	Associated	Broker or	Dealer										
States in 1	Which Per	on Liced	Has Calie	irêd an Inc	ands to Se	oliais Dural							
	"All State											□ All :	۔ دی
[AL]	[AK]	[AZ]	(AR)	[CA]	[CO]	[CT]	[DE]	[DC]	{ FL }	[GA]	[HI]	(ID	
[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	(MI)	[MN]	[MS]	[MO	
[MT]	[NE]	[NV]	(NH)	[[[[]	[NM]	[NY]	[NC]	[ND]	(OH)	[OK]	[OR]	[PA	
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR	}
Full Name	e (Last nar	ne sirst, is	individua	1)			· · · · · · · · · · · · · · · · · · ·						
Business of	or Residence	e Address	(Number	and Street	, City, Su	ate, Zip Co	ode)						
									·				
Name of	Associated	Broker or	r Dealer										
States in	Which Pers	son Listed	Has Solic	ited or Int	ends to So	olicit Purch	nasers		- · · · · · · · · · · · · · · · · · · ·				
(Check	"All State	s" or che	ck individu	al States)								□ All S	States
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID	
[IL]	[IN]	(IA)	-	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	MO	

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE	OF PROCEEDS	
1. Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.		
Type of Security	Aggregate Offering Price	Amount Alread Sold
Debt	S	S
Equity	<u>\$125,000</u>	<u>\$ 2,500</u>
□ Common □ Preferred		
Convertible Securities (including warrants)	s	\$
Partnership Interests	s	\$
Other (Specify)	S	S
Total	\$ 125,000	<u>\$ 2,500</u>
Answer also in Appendix, Column 3, if filing under ULOE.		
2. Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."	Number Investors	Aggregate Dollar Amount of Purchases
Accredited Investors	2	s 2,500
Non-accredited Investors		\$
Total (for filings under Rule 504 only)		2,500
Answer also in Appendix, Column 4, if filing under ULOE.		<u> </u>
3. If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C - Question 1.	Tomo of	Dollar Amoun
Type of offering	Type of Security	Sold
Rule 505		S
Regulation A		\$
Rule 504		s
Total	0	s 0
4: a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.		
Transfer Agent's Fees	ם	<u>s 1.500</u>
Printing and Engraving Costs	🙃	\$
Legal Fees	a	s 1,500
Accounting Fees	, 🙃	\$
Engineering Fees	c	s_3,000
Sales Commissions (specify finders' fees separately)		\$
Other Expenses (identify)		<u>12,500</u>
The state of the s		. 18,500

	C. OFFERI	NG PRICE, NUMBE	R OF INV	estors, e	XPENSES AN	D USI	OF PRO	CEEDS		
	b. Enter the difference betw tion I and total expenses fur "adjusted gross proceeds to	nished in response to	Part C - (Question 4.a	. This difference	æ is th	e		s_	106,500
	Indicate below the amount o used for each of the purpose estimate and check the box to the adjusted gross proceeds to	is shown. If the amou the left of the estima	int for any te. The tot	purpose is all of the pay	not known, fur ments listed mu	nish a st equa	n al			
	the adjusted \$1000 procedure	to the Buch per form	iii respon		- Quantum 4.0		Payment Office Director Affilia	rs, s, &	1	Payments To Others
	Salaries and fees		• • • • • • • •	• • • • • • • • • • • • • • • • • • • •		🗆	S		□ s _	
	Purchase of real estate.			• • • • • • • • • • • • •	• • • • • • • • • • • • • • • • • • • •	🗆	S		□ s _	
	Purchase, rental or leasing	ng and installation of	machinery	and equipm	nent	🗆	S		□ \$ _	· · · · · · · · · · · · · · · · · · ·
	Construction or leasing of	of plant buildings and	facilities			🗆	s		o s_	4,800
	Acquisition of other busi offering that may be use issuer pursuant to a merg	d in exchange for the	assets or	securities of	another	🗅	s		□ s_	
	Repayment of indebtedne	ess		• • • • • • • • • • • • • • • • • • • •		🗅	S		□ s_	
	Working capital			• • • • • • • • • • • •		0	<u>\$41,70</u>	0	□ s _	
	Other (specify):	ADVERTISI	NG	\$20,00	0	_ 🗆	s		 \$	
		MARKETING				_				
						🗆	s		□ s	60,000
	Column Totals			· · · · · · · · · · · · · · · ·		0	<u>541,/0</u>	<u>U</u>	<pre>5_</pre>	64,800
	Total Payments Listed (c							<u> 10</u>	6,50	0
3,3		aine in Jakara	D. FEDER	AL SIGNA	TURE					
foll	issuer has duly caused this nowing signature constitutes are st of its staff, the information	n undertaking by the i	ssuer to fu	rnish to the	U.S. Securities	and E	xchange Co	ommissi	on, up	on written re-
Issu	er (Print or Type)		Signature		// /		······································	Date		
QU	ANTUM COMPANIES,	INC.	lul	M/W	M			8/2	7/05	₹
Naı	ne of Signer (Print or Type)		Title of S	Signer (Print	or Type)			• • • • • • • • • • • • • • • • • • •		
ΜI	CHAEL KELLEHER		PRE	SIDENT						

	E. STATE SIGNATURE	
1. Is any party described in 17 CFR 230.363(c of such rule?		
See	Appendix, Column 5, for state response.	s in
2. The undersigned issuer hereby undertakes to Form D (17 CFR 239.500) at such times as		e in which this notice is filed, a notice of
The undersigned issuer hereby undertakes to issuer to offerees.	o furnish to the state administrators, upon writ	ten request, information furnished by th
	ssuer is familiar with the conditions that must state in which this notice is filed and understan shing that these conditions have been satisfied	ds that the issuer claiming the availabilit
The issuer has read this notification and knows tundersigned duly authorized person.	he contents to be true and has duly caused thi	s notice to be signed on its behalf by th
Issuer (Print or Type)	Signature	Date
QUANTUM COMPANIES, INC.	lubl Kall	e/27/03
Name (Print or Type)	Title (Print or Type)	

PRESIDENT

MICHAEL KELLEHER

1			3 Type of security			Disqual	5 lification ate ULOE			
1	4	to sell ccredited	and aggregate offering price ~	n ar regional de la con-	Type of investor and					
	investors	in State	offered in state	[amount pur	chased in State		explanation of waiver granted)		
ļ	(Part B	-Item 1)	(Part C-Item1)	Number of	(Part	C-Item 2) Number of		(Part E	-Item1)	
State	Yes	No	INVESTMENT UNIT	Accredited Investors	Amount	Non-Accredited Investors	Amount	Yes	No	
AL										
AK										
AZ										
AR										
CA	Χ									
со										
СТ										
DE						·				
DC										
FL										
GA										
HI										
ID										
IL										
IN										
IA										
KS										
KY										
LA										
ME									<u> </u>	
MD										
MA										
MI										
MN										
MS										
1,40										

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	to non-a investor	to sell accredited s in State -Item 1)	Type of security and aggregate offering price offered in state (Part C-Item1)	Type of investor and amount purchased in State (Part C-Item 2)			Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item1)		
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No
MT									
NE									
NV	Х			2	2500.00				
ИН									
ŊJ									
NM									
NY									
NC									
ND									
ОН		·							
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OR									
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WA									
wv									
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777									